Miranda W. Smith’s bout with Scleroderma began in 2000. “I observed a rough spot on my leg,” she said, and went to several doctors before going to a dermatologist, who took a biopsy from her back. He sent it off and the results confirmed that she had Scleroderma.

“It was not properly explained to me as to what this disease was. I basically was given little information. I educated myself by looking up information on the internet. From what I read, I was scared and thought I was going to die, not knowing what type of Scleroderma I had.”

Scleroderma is not hereditary but it is an autoimmune disease. Smith found out the disease can attack your skin and/or internal organs. When this disease attacks the skin it affects the elasticity of the skin and causes it to harden. Actually they call people with this type of Scleroderma “stone people.”

About a year after Smith was diagnosed she went to another dermatologist who prescribed medication for her. She takes four pills once a week to slow down the process of hardening of the skin.

“My legs and back swell and my body retains a lot of fluid. I also take fluid pills to reduce the swelling. The pain is horrible.”

I can’t walk a fourth of a mile without giving out of breath,” she added.

Scleroderma affects women, in general, more than men. Smith went to a doctor in Winston-Salem who told her she did not have Scleroderma. “He looked at my hands and because they were not darkened or discolored, he said I did not have Scleroderma. But I do have it. My symptoms are different because it affects my skin, which hardens and tightens.”

Smith also suffers with arthritis and bursitis, a complication of Scleroderma. “This disease makes you very tired,” she said. “Sitting for long periods of time or laying down makes you tired and stiff. I feel fatigued 90% of the time. My energy level is zilch.

Her skin is so dry and hard that even prescribed lotions, at $30 a bottle, don’t help.

Smith also has to deal with her diabetes. She takes two insulin injections a day plus another medication to control her diabetes. She also reveals that tests showed a spot on her lungs, first thought to be pneumonia but that now cannot be explained.

After being diagnosed in 2000, Smith worked until July 30, 2004. During this period she was hospitalized three times. “The doctors